

ALABAMA MEDICAID AGENCY PREFERRED DRUG LIST BY THERAPEUTIC CATEGORY

As a result of legislation passed by the Alabama State Legislature in June 2003, the Alabama Medicaid Agency will use a mandatory Preferred Drug List, effective October 1, 2003. Brand preferred drugs, generics (with the exception of carisoprodol products, lindane, omeprazole, and pantoprazole) and overthe-counter (OTC) drugs covered by Medicaid will be available without prior approval. If a non-preferred drug is ordered, the practitioner will need to obtain prior authorization (PA). If approval is given to dispense the non-preferred drug, an authorization number will be provided. Antipsychotic and HIV/AIDS drugs are exempt from this requirement.

Below is a list of brand preferred products on the PDL. The drug name denotes all dosage forms and strengths unless noted. An asterisk (*) denotes a generic available in at least one dosage form or strength. All covered OTC drugs and generic products (unless otherwise specified) are considered preferred. For a more complete list including non-preferred brands and more information concerning the PDL, please visit our website at www.medicaid.alabama.gov.

Anti-infective Agents Symmetrel* All covered generics and OTCs All covered generics and OTCs All covered generics and OTCs Mintezol All covered generics and OTCs Gris-Peg Mycostatin' All covered generics and OTCs Antimalarials/Combos Daraprim All covered generics and OTCs Antituberculosis Agents/Combos All covered generics and OTCs Cephalosporins All covered generics and OTCs

Macrolides/Combo All covered generics and OTCs Cleocin* All covered generics and OTCs

All covered generics and OTCs

All covered generics and OTCs

Pegasys

Chloramphenicol

Infergen

Miscellaneous Antimycobacteria All covered generics and OTCs All covered generics and OTCs

Miscellaneous Antivirals All covered generics and OTCs

Miscellaneous B-Lactams/Combos Lorabid

All covered generics and OTCs Neuraminidase Inhibitors

Relenza Tamiflu All covered generics and OTCs osides and Nucleotides

Valtrex All covered generics and OTCs

Amoxil* Augmentin XR All covered generics and OTCs

All covered generics and OTCs

All covered generics and OTCs Sumvcin*

All covered generics and OTCs All covered generics and OTCs

Behavioral Health

Alzheimer's Agents Aricept Exelon All covered generics and OTCs Monoamine Oxidase Inhibitor (MAOI) All covered generics and OTCs Selective Serotonin Reuptake Inhibitors

> Paxil CR* All covered generics and OTCs

Behavioral Health (continued) All covered generics and OTCs

Miscellaneous Antidepressants All covered generics and OTCs

Adderall XR Focalin XR Concerta Metadate CD Devedrine² Ritalin* Focalin* Vyvanse All covered generics and OTCs Miscellaneous ADHD Agents

All covered generics and OTCs Sedative/Hypnotics: Barbiturate All covered generics and OTCs

Sedatives/Hypnotics: Benzodiazepines Diastat All covered generics and OTCs

datives/Hypr All covered generics and OTCs

<u>Cardiovascular Health</u> ACE Inhibitors/Combos

Aceon

All covered generics and OTCs

Angiotensin-II Receptor Antagonists/Combos Avalide Diovan Diovan HCT Avapro

Hyzaar Benicar HCT Micardis Cozaar Micardis HCT All covered generics and OTCs

Alpha-Adrenergic Blocking Agents/Combos All covered generics and OTCs Antiarrhythmics

Norpace* Norpace CR* All covered generics and OTCs Beta-Blockers/Combos

All covered generics and OTCs Calcium-Channel Blockers/Combo Exforge Dynacirc CR

All covered generics and OTCs

Lanoxicaps

All covered generics and OTCs Central Alpha-Agonists/Combos

All covered generics and OTCs

Direct Renin Inhibitors All covered generics and OTCs

Direct Vasodilators/Combos

All covered generics and OTCs

All covered generics and OTCs Miscellaneous Cardiac Drugs

All covered generics and OTCs Miscellaneous Hypotensive Agents
All covered generics and OTCs

Nitro-Bid

All covered generics and OTCs Peripheral Adrenergic Inhibitors
All covered generics and OTCs

Platelet-Aggregation Inhibitors/Combos All covered generics and OTCs

Bile Acid Sequestrants All covered generics and OTCs Cholesterol Absorption Inhibitors

All covered generics and OTCs Fibric Acid Derivative

All covered generics and OTCs

Cardiovascular Health (continued)

HMG CoA Reductase Inhibitors/Combos Caduet Crestor Simcor Lescol XL All covered generics and OTCs Miscellaneous Antilipemic Agents Niacor Niaspar

Diabetic Agents

Alpha-Glucosidase Inhibitors

Glyset All covered generics and OTCs

Dipeptidyl Peptidase-4 (DPP-4) Inhibitors All covered generics and OTCs

All covered generics and OTCs

Lantus

Humalog

All covered generics and OTCs Megli Starlix

All covered generics and OTCs

All covered generics and OTCs

Thiazolidinediones Actos Avandia

All covered generics and OTCs abetic Combination Agents Avandaryl Avandamet All covered generics and OTCs

EENT Preparations

rgic Agent Optivar Patanol Pataday

All covered generics and OTCs asal Cortico

> Beconase AQ Nasacort AQ Veramvst All covered generics and OTCs

Tyzine All covered generics and OTCs

GastroIntestinal Agents

All covered generics and OTCs Proton-pump Inhibitors/Combos Zegerid All covered generics and OTCs (generic omeprazole and pantoprazole requires a PA)

Pain Management/Autonomic Agents

Narcotic Analgesics
All covered generics and OTCs

tive Serotonin Agonists Maxalt MLT Amerae Relpax Maxalt

All covered generics and OTCs Skeletal Muscle Relaxants

All covered generics and OTCs (generic carisoprodol products require a PA)

Respiratory

ed Corticosteroids/Combos Advair Diskus Azmacort Flovent HFA Advair HFA Aerobid Qvar Symbicort Aerobid-M Asmanex Twisthaler

All covered generics and OTCs Inhaled Antimuscarinics/Antispasmotics Atrovent HFA Spiriva

All covered generics and OTCs
Leukotriene Modifiers Accolate Singulair

All covered generics and OTCs
Mast-cell Stabilizers All covered generics and OTCs

Smooth Muscle Relaxants/Comb All covered generics and OTCs

Beta-Adrenergic Agonists/Combos Alupent* Proventi

Proventil HFA Combivent Serevent Diskus Foradil Ventolin HFA Maxair Autohaler Xopenex HFA ProAir HFA

All covered generics and OTCs

Skin and Mucous Membrane Agents

Metrogel-Vaginal* All covered generics and OTCs

Zovirax

All covered generics and OTCs

All covered generics and OTCs

Scabicides and Pediculicides

Eurax

All covered generics and OTCs

(generic lindane requires a PA)

Miscellaneous Local Anti-infectives

Phisohex

All covered generics and OTCs

Anti-inflammatory Agents

Capex Shampoo Derma-Smoothe/FS

All covered generics and OTCs

All covered generics and OTCs

All covered generics and OTCs Keratoly

All covered generics and OTCs

All covered generics and OTCs

Misc Skin and Mucous Membrane Agents All covered generics and OTCs

Women's Health

Cenestin Menest

Premarin (tabs only)

All covered generics and OTCs